

Dysport

Qatar · access guide

How to access Dysport for spasticity, cervical dystonia, or sialorrhea from Qatar: 2026 pathway via HMC Neurology, Rumailah Rehabilitation, and Sidra Medicine paediatric services

By Reserve Meds clinical & regulatory team. Last reviewed 2026-05-20.

Dysport (abobotulinumtoxinA, Ipsen) is one of the established botulinum toxin type A products with a broad set of approved therapeutic indications: cervical dystonia in adults, upper and lower limb spasticity in adults and in children aged 2 and older, and chronic sialorrhea. Dysport has been commercially available in Qatar for many years through specialist neurology, physical medicine and rehabilitation, paediatric neurorehabilitation, and otolaryngology services concentrated in the Hamad Medical Corporation network and Sidra Medicine. This page explains how a Qatar-resident adult or paediatric patient with a therapeutic indication for Dysport navigates the specialist injection pathway in 2026.

One boundary up front. Dysport is also FDA-approved for cosmetic improvement of glabellar lines. Cosmetic botulinum toxin is a routine elective service widely available in Doha private aesthetics clinics. Reserve Meds does not coordinate cosmetic botulinum toxin access. The page below is for therapeutic Dysport: cervical dystonia, spasticity, sialorrhea. If you are looking for cosmetic glabellar line treatment, the right next step is a local aesthetics clinic, not this page.

What Dysport is, in plain language

Dysport is botulinum neurotoxin type A. It is administered by intramuscular injection at the affected muscle group, by a trained specialist physician, in a clinic setting. The injected toxin temporarily blocks the chemical signal that tells the muscle to contract. The injected muscle becomes weaker over 2 to 7 days, the effect peaks at 2 to 4 weeks, and the muscle recovers to baseline over 12 to 16 weeks. The injection cycle then repeats.

Dysport is never self-administered. The patient does not receive a vial at home. The product is held at the treating hospital's specialty pharmacy, reconstituted by the injecting physician on the day of the appointment, and administered in the clinic.

Dysport units are not interchangeable with Botox, Xeomin, or Myobloc units. The injecting physician prescribes by the Dysport unit specifically.

The therapeutic indications, briefly

Cervical dystonia (adult): 500 units divided across affected neck muscles, re-injection at 12 weeks. **Upper limb spasticity (adult):** up to 1000 units divided per session, re-injection at 12 to 16 weeks. **Lower limb spasticity (adult):** up to 1500 units divided per session, re-injection at 12 to 16 weeks. **Paediatric spasticity (age 2 and older):** weight-based dosing, integrated with paediatric neurorehabilitation. **Sialorrhea (adult and paediatric age 3 and older):** parotid and submandibular gland injection by otolaryngologist with ultrasound guidance.

The Qatar specialist injection picture in 2026

Qatar concentrates specialist injection capacity in two anchor networks: Hamad Medical Corporation for adults and Sidra Medicine for paediatrics.

Adult cervical dystonia (movement disorders neurology): HMC Neurology at Hamad General Hospital runs the Qatari adult movement disorders service. Aspetar (the orthopaedic and sports medicine reference) carries adjacent neurology and rehabilitation depth. Doha Clinic Hospital, Al Ahli Hospital, and the Aster network in Doha private sector supplement.

Adult spasticity (physical medicine and rehabilitation): HMC Rumailah Hospital is the regional rehabilitation reference centre for Qatari nationals and residents, with integrated PM&R, physiotherapy, occupational therapy, and orthotic services. Aspetar carries adjacent rehabilitation depth. The Rumailah injection clinic integrates with serial casting and rehabilitation programmes, which is the operational ideal for adult spasticity care.

Paediatric spasticity (paediatric neurology and paediatric rehabilitation): Sidra Medicine is the regional paediatric centre of excellence, with paediatric neurology, paediatric rehabilitation, and paediatric anaesthesia integrated for botulinum injection sessions. Sidra also runs the regional reference paediatric selective dorsal rhizotomy programme for children with severe spastic cerebral palsy. HMC paediatric services and the paediatric departments at Al Wakra Hospital provide additional capacity. Sidra is the standout anchor for paediatric limb spasticity in Qatar.

Sialorrhea injection (otolaryngology): ENT at HMC Hamad General Hospital and at Sidra Medicine for paediatric cases, often co-managed with the referring neurology or paediatric team.

The pathway is straightforward in Qatar because Dysport is commercially registered and stocked through HMC and Sidra hospital specialty pharmacies. There is no named-patient or NPP routing complexity. The operational questions are which specialist, which clinic, what the appointment cycle looks like, and how the funding pathway runs (state-funded for Qatari nationals via HMC or Sidra, commercial insurance or self-pay for the non-national private sector).

Eligibility and the conversation with the specialist

The first appointment with the specialist is the clinical assessment to confirm the indication, set the realistic treatment goal, plan the muscle targets and dose, and align the patient or family on the injection cycle commitment.

Pre-injection review covers active infection at the planned sites, active neuromuscular junction disease (myasthenia gravis, Lambert-Eaton, ALS are relative contraindications), aminoglycoside antibiotic exposure, anticoagulant status, and pregnancy or lactation status. The treating specialist sets the re-injection calendar at the first session, with a minimum 12 weeks between sessions for the same muscle group.

The injection session, step by step

A 30-to-60-minute clinic appointment. The patient is positioned, the injection sites are marked, EMG or ultrasound guidance is used for deeper or smaller muscles, the vial is reconstituted by the physician, the injections are given, and the patient is observed for 15 to 30 minutes. The specialist briefs on what to expect (onset 2 to 7 days, peak 2 to 4 weeks, recovery over 12 to 16 weeks) and on warning signs requiring urgent attention.

For paediatric injection sessions at Sidra, the sedation or anaesthesia plan is set in advance. Sidra has the most developed paediatric anaesthesia integration for botulinum injection in the region.

The 2026 pathway, step by step

Week 0: Referral. The primary physician, neurologist, or paediatrician refers to the appropriate specialist. For Qatari nationals, the referral routes through HMC or Sidra.

Week 1 to 6: First specialist assessment. Indication confirmed, treatment goal set, injection plan drafted. For Qatari nationals, state-funded budget through HMC or Sidra; for non-Qataris, commercial insurance pre-authorisation or self-pay arrangement.

Week 4 to 10: Injection appointment scheduling.

Week 6 to 12: First injection session. Reserve Meds coordinates appointment logistics for non-national patients and patients routed through the private sector, the post-injection physiotherapy schedule where applicable, and the 12-to-16-week re-injection calendar.

Week 18 to 24: First post-injection follow-up and re-injection.

Month 6 to 12: Ongoing 12-to-16-week injection cycle integrated with rehabilitation.

Cost expectation in QAR

For Qatari nationals being treated at HMC or Sidra, therapeutic botulinum toxin for cervical dystonia, spasticity, and sialorrhea is typically funded through the state budget. The patient's out-of-pocket exposure is minimal.

For non-Qatari residents and Qatari nationals routed through the private sector, the cost picture is set per centre. Per-vial private-pay cost of Dysport at the Qatar specialty pharmacy commonly runs USD 800 to USD 1,500 per 500-unit vial. Per-session injection cost including physician fee, clinic fee, supplies, and the vial itself typically runs USD 1,500 to USD 4,000 depending on indication, dose, and centre. A spasticity patient receiving 4 sessions per year at the upper unit end runs an annual drug-plus-procedure cost of approximately USD 8,000 to USD 16,000.

At 2026 indicative cross rates, the QAR-equivalent annual cost band is approximately QAR 29,000 to QAR 58,000 per patient. Commercial insurance coverage through QLM, AXA, Bupa, and the Qatar commercial insurers is commonly available for therapeutic botulinum toxin with documented medical necessity and prior authorisation. Cosmetic glabellar line injection is patient-pay only and is not coordinated by Reserve Meds.

What to monitor

Distant spread of toxin effect (boxed warning): difficulty swallowing or breathing, generalised weakness, eye droop. Highest risk in paediatric limb spasticity at higher doses. Briefed at every session.

Dysphagia after cervical dystonia injection: common, dose-related, usually mild and self-limited over 1 to 4 weeks.

Injection-site reactions: local pain, bruising, mild swelling. Self-limited.

Antibody formation with repeated injection: the 12-week minimum re-injection interval is the discipline that minimises this risk.

Pregnancy: limited data, case-by-case benefit-risk discussion. **Lactation:** generally compatible.

Drug interactions: aminoglycosides and other neuromuscular junction blockers may potentiate the effect. Medication review at every session.

Religious, ethical, and family-logistics framing

Dysport contains human serum albumin as an excipient. The treating specialist can discuss alternatives (Xeomin, which does not contain human serum albumin) for patients or families who prefer to avoid the human serum albumin component. Reserve Meds raises this proactively where it is likely to be relevant.

The 12-to-16-week injection cycle is operationally forgiving and accommodates Ramadan, Hajj, summer travel, and family commitments without significant disruption.

For paediatric patients the family-logistics conversation is the larger one. Spasticity care is a multi-year commitment integrated with physiotherapy, orthotic management, and where appropriate orthopaedic and neurosurgical input. Sidra is designed to support the family through the multi-year journey.

When Dysport is not the right call

For cosmetic glabellar lines, Dysport via Reserve Meds is not the pathway. Local Doha aesthetics clinics provide cosmetic botulinum toxin as a routine elective service. Reserve Meds does not coordinate cosmetic botulinum toxin.

For patients with active neuromuscular junction disease, active infection at the injection site, severe fixed contracture (orthopaedic surgical referral), or neutralising antibodies to type A with reduced clinical response (Xeomin or Myobloc alternative), the specialist sets the threshold and the operational pathway shifts accordingly.

Reserve Meds does not push Dysport as a default. The page above describes the Dysport pathway because Dysport is the product the patient or family has asked about.

What Reserve Meds does on this case

We are a US-based concierge coordinator for specialty pharma access. For therapeutic Dysport cases in Qatar we identify the appropriate specialist (movement disorders neurologist for cervical dystonia, physiatrist at Rumailah for adult spasticity, paediatric neurologist or paediatric rehab at Sidra for paediatric spasticity, otolaryngologist for sialorrhea), coordinate the first specialist appointment, run the insurance or state-funded pre-authorisation conversation in parallel with the clinical pre-authorisation, schedule the injection session and the post-injection physiotherapy programme, and maintain the 12-to-16-week re-injection calendar. We do not sell, dispense, store, transport, or administer the product. The treating specialist and the dispensing centre own clinical and supply chain.

Cosmetic botulinum toxin for glabellar lines is outside Reserve Meds scope. Clinical decisions remain with your treating specialist.

Reserve Meds's role

US-based concierge coordinator for cross-border specialty medicine. We are not the prescriber, not the dispensing pharmacy, and not the manufacturer. All clinical decisions remain with your treating physician.

Reserve Meds

reserved for you.

Composite case examples. This document is for general information only and does not constitute medical advice. Please consult your treating physician.

Reserve Meds is in pre-launch. Published timelines and cost ranges are indicative, not guarantees.

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